|          |            |       | SCTEDMINIATION | RECORD   |
|----------|------------|-------|----------------|----------|
| DATENT A | PPLICATION | LFF r | DETERMINATION  | 11500115 |

Effective October 1, 2001

Application or Docket Number

094885019

|  | C   | LAIMS AS                                  | FILED - F               |             | (Colum                                    | n 2)             |      | MALL EN             | _                      | OR       | SMALL E            |                        |
|--|---|---|-------------------------|-------------|---|------------------|------|---------------------|------------------------|----------|--------------------|------------------------|
| TOT  | AL CLAIMS   |   | 20                      |             |   |                  | ſ    | RATE                | FEE                    |          | RATE               | FEE                    |
| (  |   |   | NUMBER F                | ILED        | LED NUMBER EXTRA                          |                  | 1    | BASIC FEE           | 370.00                 | OR       | ASIC FEE           | 740.00                 |
| TOTAL CHARGEABLE CLAIMS 20 minus 20=                     |   |   | *                       |             |   | X\$ 9=           |      | OR                  | X\$18=                 |          |                    |                        |
| INDEPENDENT CLAIMS 3 minus 3 =                           |   |   |                         | *           |   |                  | X42= |                     | OR                     | X84=     |                    |                        |
| MULTIPLE DEPENDENT CLAIM PRESENT                         |   |   |                         |             | <b></b>                                   |                  |      | .140                |                        | l t      | +280=              |                        |
| * If the difference in column 1 is less than zero, enter |   |   |                         |             | or "O" in co                              | olumn 2          |      | +140=               |                        | OR<br>OR | TOTAL              | 740                    |
| * If th  |   | AIMS AS A                                 |                         | - PAF       | RT II                                     |                  |      | TOTAL               | ENTITY                 | OR       | OTHER<br>SMALL     | THAN                   |
|  |   | (Column 1)                                |                         |             | ımn 2)<br>HEST                            | (Column 3)       | l    |                     | ADDI-                  | 1        |                    | ADDI-                  |
| EN L   |   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                         | NUI<br>PREV | MBER<br>YOUSLY<br>D FOR                   | PRESENT<br>EXTRA | ŀ    | RATE                | TIONAL<br>FEE          |          | RATE               | TIONAL<br>FEE          |
|  | Total   | *   | Minus                   | **          |   | =                |      | X\$ 9=              |                        | OR       | X\$18=             |                        |
|  | Independent   | *   | Minus                   | ***         |   | =                |      | X42=                |                        | OR       | X84=               |                        |
|  | FIRST PRESE   | NTATION OF N                              | NULTIPLE DE             | PENDE       | NT CLAIM                                  |                  | ]    | +140=.              |                        | OR       | +280=              |                        |
|  |   |   |                         |             |   |                  |      | TOTAL<br>ADDIT. FEE |                        | OR       | TOTA<br>ADDIT. FEI |                        |
|  |   | (Column 1)                                |                         | (Co         | lumn 2)                                   | (Column 3        | )    |                     |                        | _        |                    |                        |
| T-B  |   | CLAIMS<br>REMAINING<br>AFTER              | -                       | NI<br>PRE   | GHEST<br>JMBER<br>VIOUSLY<br>AID FOR      | PRESENT<br>EXTRA |      | RATE                | ADDI-<br>TIONAI<br>FEE | -        | RATE               | ADDI-<br>TIONAL<br>FEE |
| AMENDMENT B  | Total   | AMENDMEN'                                 | Minus                   | **          | ND FOR                                    | =                | 1    | X\$ 9=              |                        | OF       | X\$18=             |                        |
| END  | Independent   | *   | Minus                   | ***         |   | =                |      | X42=                | 1                      | OF       | X84=               |                        |
| ₹  | FIRST PRESE   | NTATION OF                                | MULTIPLE D              | EPEND       | NT CLAIM                                  | A 🔲              |      | +140=               | 1                      | ٦_       | 200                |                        |
|  |   |   |                         |             |   |                  |      | +140=<br>TOTA       |                        | OF<br>OF | ` L                | <del></del> _          |
|  |   |   |                         |             |   |                  |      | ADDIT. FE           |                        |          | ADDIT. FI          | EE <b>L</b>            |
|  |   | (Column 1                                 | 1)                      |             | olumn 2)                                  | (Column          | 3)   |                     |                        |          |                    | 4.00                   |
| AMENDMENT C  |   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMEN  |                         | PF          | HIGHEST<br>NUMBER<br>EVIOUSLY<br>PAID FOR | PRESENT<br>EXTRA | r    | RATE                | ADDI<br>TIONA<br>FEE   | L        | RATE               | ADDI<br>TIONA<br>FEE   |
|  | Total   | *   | Minus                   | **          |   | =                |      | X\$ 9=              |                        | 0        | R X\$18            | =                      |
| ĮĮ.  | Independent   | *   | Minus                   | ***         |   | =                |      | X42=                |                        |          | R X84:             | =                      |
|  | FIRST PRES  | SENTATION OF                              | F MULTIPLE I            | DEPEN       | ENT CLA                                   | IM               |      | +140=               |                        | $\neg$   | R +280             | )=                     |
|  | * If the entry in co  | luma 4 ia lage th                         | on the entry in         | column 2    | , write "0" in                            | column 3.        |      | TOT                 |                        | -        | L TO               | TAL                    |
| Į.   | <ul> <li>If the entry in co</li> <li>If the "Highest I</li> </ul> | minum 1 15 1855 U                         | COLUMN TO COLUMN TO THE |             |   |                  |      | " ADDIT. FI         |                        | - 10     | ADDIT. 1           |                        |